

12-08-00

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Docket No.: AB-1085 US

December 6, 2000

Box Patent Application
Commissioner For Patents
Washington, D. C. 20231

Enclosed herewith for filing is a patent application, as follows:

Inventors: MOTOZAWA, Yasuki and YOSHIDA, Kazuya

Title: OCCUPANT PROTECTIVE APPARATUS

☒ Return Receipt Postcard
☒ This Transmittal Letter (in duplicate)
12 page(s) Specification ☒ and Title Page (not including claims)
2 page(s) Claims
1 page Abstract
5 Sheet(s) of Drawings
1 page(s) PTO Form 1449 citing one (1) reference
☒ Copy(ies) of one (1) cited reference submitted

CLAIMS AS FILED

For	Number			Number		Rate		Basic Fee
Total Claims	Filed			Extra				
	5	-20	=	0	x	\$ 18.00	=	\$ 710.00
								\$ 0.00
Independent	1	-3	=	0	x	\$80	=	\$ 0.00
Claims								
<input type="checkbox"/>	Fee of _____ for the first filing of one or more multiple dependent claims per application							\$
<input type="checkbox"/>	Fee for Request for Extension of Time							\$

Please make the following charges to Deposit Account 19-2386:

- ☒ Total fee for filing the patent application in the amount of \$ 710.00
☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account 19-2386.

EXPRESS MAIL LABEL NO:

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Respectfully submitted,

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